## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## RESPONSE UNDER RULE 116 EXPEDITED HANDLING PROCEDURES

In re Patent Application of	Atty	BJS-62	20_430	EXPEDITED HANDLING PRO	CEDURES
пте Расенс друпсацоп от	Dkt.				
NELDMAN -4 -1	TO/A	C#	M#		
	TC/A.U.	1623			
Serial No. 10/579,230	Examiner:	•	.h		
Filed: September 28, 2006			ber 5, 2010		
Title: PHARMACEUTICAL FORMULATIONS SPHINGOLIPIDS AND THEIR USE	EMPLOTING S	покт-с	πAIN		
Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Sir:	ECDONCE/AA	A ENDRA		n	
RESPONSE/AMENDMENT/LETTER  This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.					
☐ Correspondence Address Indic	cation Forn	n Atta	ched.		
Fees are attached as calculated below: Total effective claims after amendment previously paid for 60 (at least 2)		highest × \$52.0	number 0	\$0.00 (1202)/\$0.00 (2202) \$	0.00
Independent claims after amendment previously paid for <b>3</b> (at least 3) =		highest x \$220.	number 00 \$	\$220.00 (1201)/\$110.00 (2201) \$	220.00
If proper multiple dependent claims now add	ded for first tin	ne, (igno			
Petition is hereby made to extend the current paper and attachment(s)	One Two M Three M Four	Month Ionth Ex onth Ex Month E	over the filing Extension \$ ktensions \$4 tensions \$1 Extensions \$	\$390.00 (1203)/\$195.00 (2203) \$ g date of this 130.00 (1251)/\$65.00 (2251) 90.00 (1252)/\$245.00 (2252) 110.00 (1253/\$555.00 (2253) 1730.00 (1254/\$865.00 (2254) 350.00 (1255/\$1175.00 (2255) \$	0.00
Terminal disclaimer enclosed, add			\$	\$140.00 (1814)/ \$70.00 (2814) \$	0.00
☐ Applicant claims "small entity" status. ☐ Statement filed herewith					
Rule 56 Information Disclosure Statement F	Filing Fee			\$180.00 (1806) \$	0.00
Assignment Recording Fee				\$40.00 (8021) \$	0.00
Other:				\$	0.00
				NICALLY BY CREDIT CARD \$	220.00
☐ CREDIT CARD PAYMENT (FORM ATTACHED IF PAPER FILING).					
The Commissioner is hereby authorized to charge any <u>deficiency</u> , or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.					
901 North Glebe Road, 11 <sup>th</sup> Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100			ANDERHYE J. Sadoff, R	P.C. eg. No. 36,663	
BJS:pp	Sigr	nature:		/B. J. Sadoff/	